

## **City of Puyallup – Fire Prevention Department Application for Fire Code – Construction Permit**

333 S. Meridian Puyallup, WA 98371

Tel: (253) 864-4182 (in association to the fire sprinkler/alarm submittal)

Parcel #: 9810000014 Site Address: 401 15th Ave SE Phone #: Owner Name: Multicare Health System City: Tacoma Owner Address: PO Box 4299 Zip: 98415 Contractor Name: Patriot Fire Protection Phone #: 253-926-2290 Zip: 98424 Contractor Address: 2707 70th Ave E City: Tacoma City Business License #:00910109 Exp. Date: 10/5/23 WA License #: PATRIFP099CF Contact Person: Contact Email Address: Matt Greene mattg@patriotfire.com Contact Phone #: Contact Fax #: 253-377-2272

## PROJECT DESCRIPTION (TO INCLUDE TENANT NAME):

Building Permit #\_\_\_\_\_

Add/relocate sprinkler for TI walls and ceilings

THE APPLICANT HEREBY MAKES APPLICATION FOR THE FOLLOWING FIRE CODE PERMIT				
Permit	Description	# of Devices or square footage		Notes/Requirements
☐ Fire Sprinkler – New	Installation of a New Automatic Fire Sprinkler System		Total square footage of fire sprinkler required	
<ul><li></li></ul>	Tenant Improvement to Existing Fire Sprinkler System	14	NFPA #13, 2016 Ed. Light Hazard	
☐ Fire Alarm System -New	Installation of a New Fire Alarm System		Designed to total coverage NFPA72	
☐ Fire Alarm System - Tenant Improvement	Tenant Improvement to Existing Fire Alarm System		Designed to total coverage NFPA72	
☐ Hood Suppression	New or modification of existing system			
☐ Generator	Backup Generator or Emergency Generator - \$265			
☐ OTHER				
***Selection Below Must Be Completed By Applicant ~ Please Check One***				
U.L. Certification/Third Party Acknowledgement				
NICET Level of Fire Alarm Designer Acknowledgment				
***I have submitted a minimum of three sets of plans and calculations/cut sheets***				
Signature: Naddhafur		Date:	2/24/23	
		Т		
Print Signature: Matt Greene		<b>Email:</b>	mattg@patriotfire.com	

1